PTO/SB/17 (12-04

Approved for use through 07/31/2006. OMB 0651-0032 U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

202-530-1010

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number Complete if Known Effective on 12/08/2004 eş pursuant to the Consolidated Appropriations Act. 2005 (H.R. 4818) **Application Number** 10/656.204 FEE TRANSMITTAL Filing Date September 8, 2003 For FY 2005 HIDETOSHI NOJIRI First Named Inventor Examiner Name Ryan M. Gleitz Applicant claims small entity status. See 37 C.F.R. 1.27 Art Unit 2852 Attorney Docket No. 03500.017148 TOTAL AMOUNT OF PAYMENT (\$) 0.00 METHOD OF PAYMENT (check all that apply) Money Order None Other (please identify): Check Credit Card 06-1205 Deposit Account Name: Fitzpatrick, Cella, Harper & Scinto Deposit Account Deposit Account Number: For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) Charge fee(s) indicated below, except for the filing fee Charge fee(s) indicated below Charge any additional fee(s) or underpayments of Credit any overpayments fee(s) under 37 C.F.R. 1.16 and 1.17 WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038. **FEE CALCULATION** 1. BASIC FILING, SEARCH, AND EXAMINATION FEES **FILING FEES EXAMINATION FEES** SEARCH FEES **Small Entity Small Entity** Small Entity **Application Type** Fees Paid (\$) Fee (\$) Fee(\$) Fee (\$) Fee (\$) Fee(\$) Fee(\$) Utility 300 150 500 100 250 200 Design 200 100 100 50 130 65 Plant 200 100 300 150 80 160 Reissue 300 150 500 250 600 300 2. EXCESS CLAIM FEES **Small Entity** Fee Description Fee(\$) Fee(\$) Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent 50 25 Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent 200 100 Multiple dependent claims 360 180 **Total Claims Extra Claims** Fee (\$) Fee Paid (\$) **Multiple Dependent Claims** - 20 or HP = Fee Paid (\$) Fee(\$) HP = highest number of total claims paid for, if greater than 20 Indep. Claims **Extra Claims** Fee Paid (\$) Fee(\$) 0 - 3 or HP = х HP = highest number of independent claims paid for, if greater than 3 3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Number of each additional 50 or fraction thereof **Total Sheets** Extra Sheets Fee (\$) Fee Paid (\$) - 100 = (round up to a whole number) x 4. OTHER FEE(S) Fees Paid (\$) Non-English Specification, \$130 fee (no small entity discount) Other: SUBMITTED BY Signature Registration No. Telephone

Name (Print/Type)

(Attorney/Agent) 30,110

03500.017148



PATENT APPLICATION

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:)	
	:	Examiner: Ryan M. Gleitz
HIDETOSHI NOJIRI)	-
	:	Group Art Unit: 2852
Application No.: 10/656,204)	-
	:	Confirmation No.: 7504
Filed: September 8, 2003)	
	:	
For: RECORDING MEDIUM RESIDUAL)	July 7, 2005
AMOUNT DETECTING DEVICE, IMAGE	:	
FORMING APPARATUS PROVIDED WITH)	
DEVICE, AND PROGRAM FOR OPERATING	ડે :	
COMPUTER)	
Mail Stop Amendment		
COMMISSIONER FOR PATENTS		
P.O. Box 1450		
Alexandria, Virginia 22313-1450		

AMENDMENT

Sir:

In response to the Office Action mailed April 7, 2005, Applicant submits the following amendments and remarks.